

3679 \$

PTO/SB/17 (01-03) Approved for use through 04/30/2003, OMB 0651-0032

FEE TRANSMITTAL
for FY 2003

Effective 01/06/2003. Patent Fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

Application Number	10,000,559
Filing Date	January 4, 2002
First Named Inventor	Fenwick et al.
Examiner Name	Ryan M. Flandro
Group/Art Unit	3679
Attorney Docket Number	28809.0002

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GROUP 3600

TOTAL AMOUNT OF PAYMENT (\$78)

FEE CALCULATION (continued)

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☐ Deposit Account: Deposit Account Number: 08-2442
Deposit Account Name: Hodgson Russ LLP

The Commissioner is hereby authorized to (check all that apply)

☐ Charge fee(s) indicated below

☒ Charge any fee deficiencies or credit any overpayments

☐ Charge any additional fees during pendency of this application.

☐ Charge fees indicated below, except for the filing fee to the above-identified deposit account

3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid			
Fee Code	Fee (\$)	Fee Code	Fee (\$)					
1051	130	2051	65	Surcharge - late filing fee or oath	\$			
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	\$			
1053	130	1053	130	Non-English specification	\$			
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination	\$			
1804	920*	1804	920*	Requesting Publication of SIR prior to Examiner Action	\$			
1805	1,840*	1805	1,840*	Requesting Publication of SIR after Examiner Action	\$			
1201	110	2201	55	Extension for reply within first month	\$			
1202	410	2202	205	Extension for reply within second month	\$			
1203	930	2203	465	Extension for reply within third month	\$			
1204	1,450	2204	725	Extension for reply within fourth month	\$			
1205	1,970	2205	985	Extension for reply within fifth month	\$			
SUBTOTAL (1)				\$0				
2. EXTRA CLAIM FEES FOR UTILITY/ REISSUE				Fee Paid				
Total Claims / 24 / -20** = / 4 / x / 9 / =				\$36				
Independent Claims / 4 / - 3** = / 1 / x / 42 / =				\$42				
Multiple dependent / / x / / =				\$				
Large Entity Small Entity								
Fee Code (\$)	Fee Code (\$)	Fee Description						
1202	18	2202	9	Claims in excess of 20	\$			
1201	84	2201	42	Independent claims in excess of 3	\$			
1203	280	2203	140	Multiple dependent claim if not paid	\$			
1204	84	2204	42	**Reissue independent claims over original patent	\$			
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent	\$			
SUBTOTAL (2)				\$78				
SIGNATURE:								
John M. Del Vecchio Reg. No. 42,475								
DATE: February 20, 2003 Telephone: (716) 848-1644								
1809				750	2809	375	Filing a submission after final rejection(37 CFR 1.129(a))	\$
1810				750	2810	375	For each add'l invention to be examined(37 CFR 1.129(b))	\$
1801				750	2801	375	Request For Continued Examination (RCE)	\$
1802				900	1802	900	Request for Expedited Examination of a design application	\$
Other fee (specify)							\$	
*Reduced by basic filing fee paid								
SUBTOTAL (3)							\$0	

I hereby Certify that this Correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231, on February 20, 2003.

Name
Michele Ortolano

Signature

February 20, 2003
Date of Signature

BFLODOCS: 789903 v1